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**APPLICANTS**

ROBERT L. CAMPBELL, BAHAMA, NC;

PERRY D. HAALAND, CHAPEL HILL, NC;

DOUGLAS B. SHERMAN, DURHAM, NC; WALTER WILLIAM STEWART II, CARY, NC;

SHEILA A. LLOYD, CARY, NC;

**\*\* CONTINUING DATA \*\*\*\*\***

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	<b>STATE OR COUNTRY</b> NC	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 131	<b>INDEPENDENT CLAIMS</b> 9
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Verified and Acknowledged: *[Signature]* Allowance Examiner's Signature *[Initials]*

**ADDRESS**

RICHARD J RODRICK  
BECTON DICKINSON AND COMPANY  
1 BECTON DRIVE  
FRANKLIN LAKES , NJ  
07417

**TITLE**

METHODS, APPARATUS AND COMPUTER PROGRAM PRODUCTS FOR FORMULATING CULTURE MEDIA

<b>FILING FEE</b>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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